



4,400% INCREASE in girls referred for gender transition treatment in the UK in 10 years.

55% Percent of detransitioners who say they received no adequate evaluation before being put on life-altering drugs

0 Clinical Trials or FDA Approvals showing Puberty Blockers and Cross Sex Hormones for Gender Dysphoria to be safe

50% Of pediatric gender clinics that do not require any psychological assessment before starting life-altering puberty blockers and cross-sex hormones

The Emergency Regulation Prohibits Transition Interventions Absent Specific Safeguards

1

INFORMING PATIENTS THAT, AMONG OTHER THINGS;

The use of puberty blocker drugs or cross-sex hormones to treat gender identity disorder or gender dysphoria is experimental and is not approved by the Food and Drug Administration (FDA)

The FDA has issued a warning that puberty blockers can lead to brain swelling and blindness

Sweden's National Board of Health and Welfare recently declared that, at least for minors, "the risks of puberty suppressing treatment with GnRH-analogues and gender-affirming hormonal treatment currently outweigh the possible benefits"

The Endocrine Society found that "the large majority (about 85%) of prepubertal children with a childhood diagnosis did not remain GD/gender incongruent in adolescence"

2

ADDITIONAL SAFEGUARDS INCLUDING:

Ensuring all individuals have access to mental health treatment including a full psychological or psychiatric assessment, consisting of not fewer than 15 separate, hourly sessions over the course of not fewer than 18 months

Ensuring that any existing mental health comorbidities of the patient have been treated and resolved

Tracking all adverse effects that arise from any course of covered gender transition intervention for all patients beginning the first day of intervention and continuing for a period of not fewer than 15 years

Ensuring that the patient has received a comprehensive screening to determine whether the patient has autism

Obtaining and keeping on file informed written consent

Progressive Countries that are Restricting Gender Transition Interventions for Minors



Finland

"As far as minors are concerned, there are no medical treatments that can be considered evidence-based."

Finland's National Health Care Council

Sweden

"Lack of reliable scientific evidence concerning the efficacy and the safety of both treatments [puberty blockers and cross-sex hormones]."

Sweden's National Board of Health and Welfare

England

"Found limited evidence for the effectiveness and safety of gender-affirming hormones in children and adolescents with gender dysphoria, with all studies being uncontrolled, observational studies, and all outcomes of very low certainty."

England's National Institute of Health

“

As Attorney General, I will protect children and enforce the laws as written, which includes upholding state law on experimental gender transition interventions.

”

Missouri Attorney General Andrew Bailey



ANDREW BAILEY
MISSOURI ATTORNEY GENERAL

FAST FACTS
EMERGENCY HEALTHCARE REGULATION

“ As Attorney General, I will protect children and enforce the laws as written, which includes upholding state law on experimental gender transition interventions. ”

The Emergency Healthcare Regulation Focuses on 2 Specific Avenues of Care

1 Specific informed-consent disclosures informing patients that;

The use of puberty blocker drugs or cross-sex hormones to treat gender identity disorder or gender dysphoria is experimental and is not approved by the Food and Drug Administration (FDA)

The FDA has issued a warning that puberty blockers can lead to brain swelling and blindness

Sweden’s National Board of Health and Welfare (“NBHW”) recently declared that, at least for minors, “the risks of puberty suppressing treatment with GnRH-analogues and gender-affirming hormonal treatment currently outweigh the possible benefits”

The Endocrine Society found that “the large majority (about 85%) of prepubertal children with a childhood diagnosis did not remain GD/gender incongruent in adolescence”

2 Additional Safeguards including;

Full psychological or psychiatric assessment, consisting of not fewer than 15 separate, hourly sessions over the course of not fewer than 18 months

ensure that any existing mental health comorbidities of the patient have been treated and resolved

tracking all adverse effects that arise from any course of covered gender transition intervention for all patients beginning the first day of intervention and continuing for a period of not fewer than 15 years

ensure that the patient has received a comprehensive screening to determine whether the patient has autism

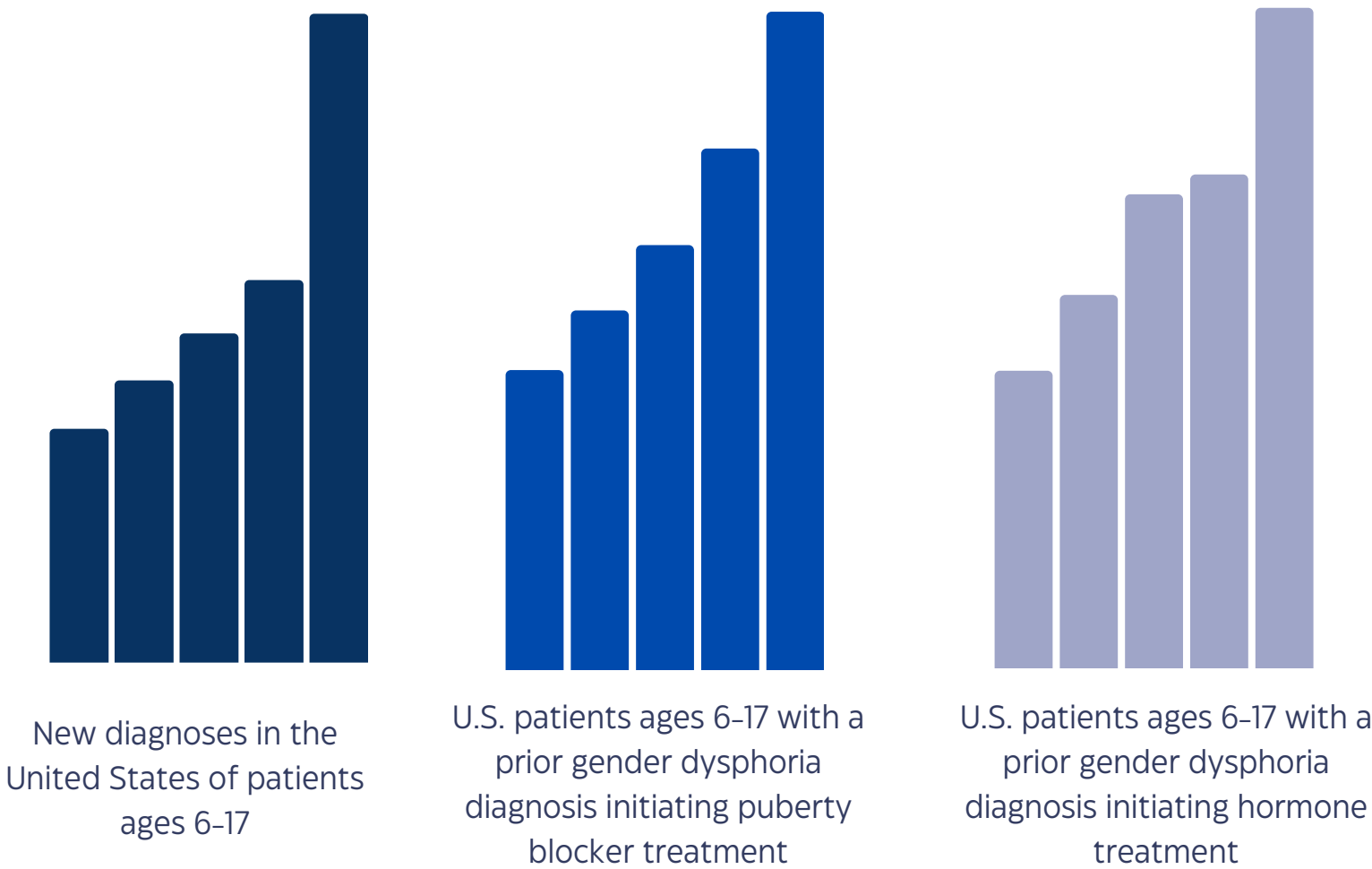
obtain and keep on file informed written consent

Despite a sharp increase in children seeking gender care there have been

0 Clinical Trials or FDA Approvals

for Puberty Blockers and Sex Hormones used in Children’s Gender Care

Data pulled from: <https://www.reuters.com/investigates/special-report/usa-transyouth-data/>



Progressive Countries that are Questioning Interventionist Healthcare for Minors



- Finland**
“As far as minors are concerned, there are no medical treatments that can be considered evidence-based.”
Finland’s National Health Care Council
- Sweden**
“Lack of reliable scientific evidence concerning the efficacy and the safety of both treatments [puberty blockers and cross-sex hormones].”
Sweden’s National Board of Health and Welfare
- England**
“Found limited evidence for the effectiveness and safety of gender-affirming hormones in children and adolescents with gender dysphoria, with all studies being uncontrolled, observational studies, and all outcomes of very low certainty.”
England’s National Institute of Health



ANDREW BAILEY
MISSOURI ATTORNEY GENERAL

FAST FACTS
EMERGENCY HEALTHCARE REGULATION

“As Attorney General, I will protect children and enforce the laws as written, which includes upholding state law on experimental gender transition interventions.”

4,400% INCREASE in girls referred for gender transition treatment in the UK in 10 years.

55% Percent of detransitioners who say they received no adequate evaluation before being put on life-altering drugs

50% Of pediatric gender clinics that do not require any psychological assessment before starting life-altering puberty blockers and cross-sex hormones

0 Clinical Trials or FDA Approvals have concerning the use of Puberty Blockers and Sex Hormones in Children's Gender Care

The Emergency Healthcare Regulation
Focuses on Two Specific Avenues of Care

1 **SPECIFIC INFORMED-CONSENT DISCLOSURES INFORMING PATIENTS THAT;**

- THE USE OF PUBERTY BLOCKER DRUGS OR CROSS-SEX HORMONES TO TREAT GENDER IDENTITY DISORDER OR GENDER DYSPHORIA IS EXPERIMENTAL AND IS NOT APPROVED BY THE FOOD AND DRUG ADMINISTRATION (FDA)
- THE FDA HAS ISSUED A WARNING THAT PUBERTY BLOCKERS CAN LEAD TO BRAIN SWELLING AND BLINDNESS
- SWEDEN'S NATIONAL BOARD OF HEALTH AND WELFARE ("NBHW") RECENTLY DECLARED THAT, AT LEAST FOR MINORS, "THE RISKS OF PUBERTY SUPPRESSING TREATMENT WITH GNRH-ANALOGUES AND GENDER-AFFIRMING HORMONAL TREATMENT CURRENTLY OUTWEIGH THE POSSIBLE BENEFITS"
- THE ENDOCRINE SOCIETY FOUND THAT "THE LARGE MAJORITY (ABOUT 85%) OF PREPUBERTAL CHILDREN WITH A CHILDHOOD DIAGNOSIS DID NOT REMAIN GD/GENDER INCONGRUENT IN ADOLESCENCE"

2 **ADDITIONAL SAFEGUARDS INCLUDING;**

- FULL PSYCHOLOGICAL OR PSYCHIATRIC ASSESSMENT, CONSISTING OF NOT FEWER THAN 15 SEPARATE, HOURLY SESSIONS OVER THE COURSE OF NOT FEWER THAN 18 MONTHS
- ENSURE THAT ANY EXISTING MENTAL HEALTH COMORBIDITIES OF THE PATIENT HAVE BEEN TREATED AND RESOLVED
- TRACKING ALL ADVERSE EFFECTS THAT ARISE FROM ANY COURSE OF COVERED GENDER TRANSITION INTERVENTION FOR ALL PATIENTS BEGINNING THE FIRST DAY OF INTERVENTION AND CONTINUING FOR A PERIOD OF NOT FEWER THAN 15 YEARS
- ENSURE THAT THE PATIENT HAS RECEIVED A COMPREHENSIVE SCREENING TO DETERMINE WHETHER THE PATIENT HAS AUTISM
- OBTAIN AND KEEP ON FILE INFORMED WRITTEN CONSENT

Progressive Countries that are Questioning Interventionist Healthcare for Minors



- Finland**
"As far as minors are concerned, there are no medical treatments that can be considered evidence-based."
Finland's National Health Care Council
- Sweden**
"Lack of reliable scientific evidence concerning the efficacy and the safety of both treatments [puberty blockers and cross-sex hormones]."
Sweden's National Board of Health and Welfare
- England**
"Found limited evidence for the effectiveness and safety of gender-affirming hormones in children and adolescents with gender dysphoria, with all studies being uncontrolled, observational studies, and all outcomes of very low certainty."
England's National Institute of Health



As Attorney General, I will protect children and enforce the laws as written, which includes upholding state law on experimental gender transition interventions.

The Emergency Healthcare Regulation Focuses on Two Specific Avenues of Care

1 Specific informed-consent disclosures informing patients that;

The use of puberty blocker drugs or cross-sex hormones to treat gender identity disorder or gender dysphoria is experimental and is not approved by the Food and Drug Administration (FDA)

The FDA has issued a warning that puberty blockers can lead to brain swelling and blindness

Sweden’s National Board of Health and Welfare (“NBHW”) recently declared that, at least for minors, “the risks of puberty suppressing treatment with GnRH-analogues and gender-affirming hormonal treatment currently outweigh the possible benefits”

The Endocrine Society found that “the large majority (about 85%) of prepubertal children with a childhood diagnosis did not remain GD/gender incongruent in adolescence”

2 Additional Safeguards including;

Full psychological or psychiatric assessment, consisting of not fewer than 15 separate, hourly sessions over the course of not fewer than 18 months

ensure that any existing mental health comorbidities of the patient have been treated and resolved

tracking all adverse effects that arise from any course of covered gender transition intervention for all patients beginning the first day of intervention and continuing for a period of not fewer than 15 years

ensure that the patient has received a comprehensive screening to determine whether the patient has autism

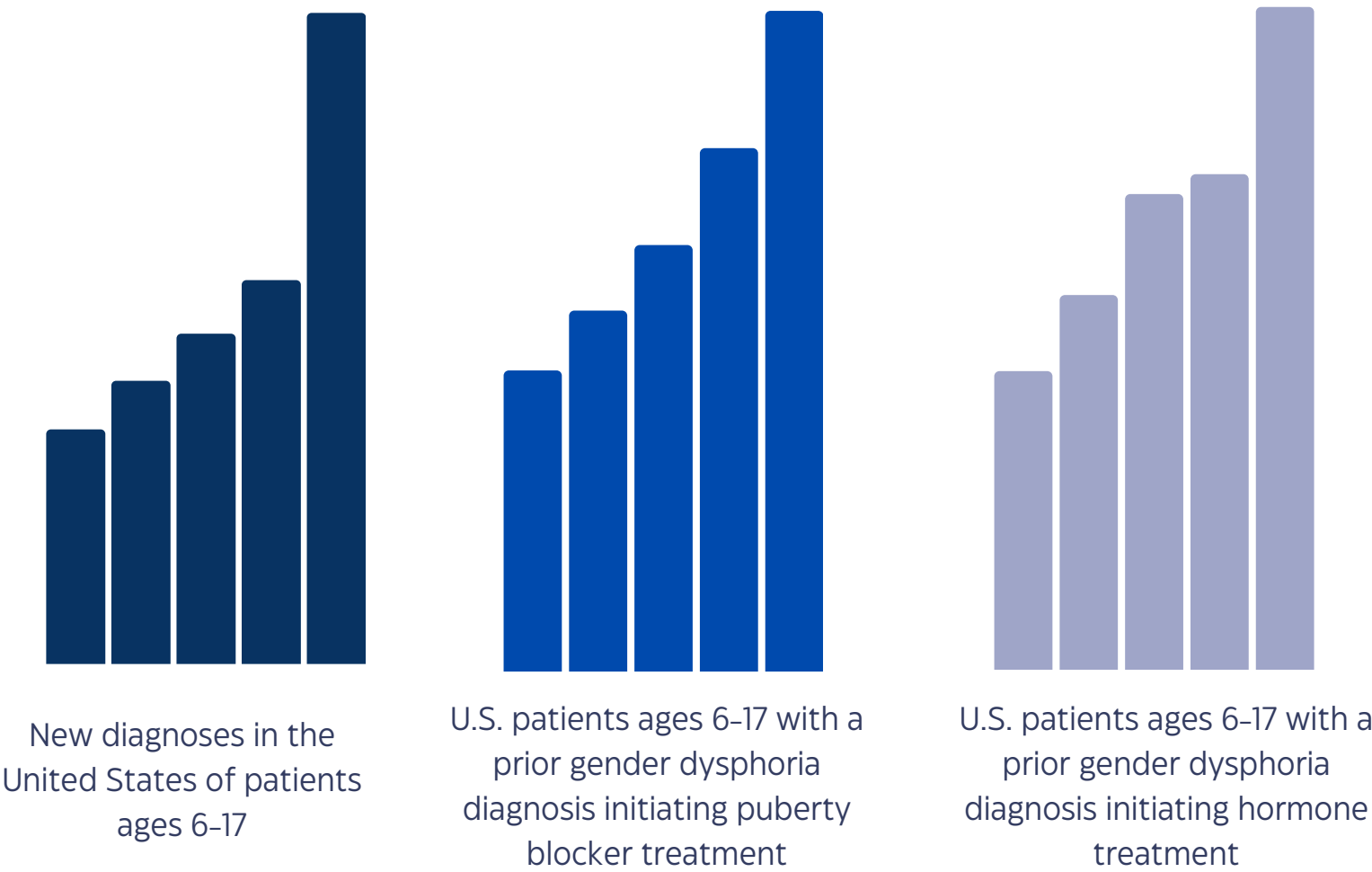
obtain and keep on file informed written consent

Despite a sharp increase in children seeking gender care there have been

0 Clinical Trials
or
FDA Approvals

for Puberty Blockers and Sex Horomones used in Children's Gender Care

Data pulled from: <https://www.reuters.com/investigates/special-report/usa-transyouth-data/>



Progressive Countries that are Questioning Interventionist Healthcare for Minors



- Finland**
“As far as minors are concerned, there are no medical treatments that can be considered evidence-based.”
Finland’s National Health Care Council
- Sweden**
“Lack of reliable scientific evidence concerning the efficacy and the safety of both treatments [puberty blockers and cross-sex hormones].”
Sweden’s National Board of Health and Welfare
- England**
“Found limited evidence for the effectiveness and safety of gender-affirming hormones in children and adolescents with gender dysphoria, with all studies being uncontrolled, observational studies, and all outcomes of very low certainty.”
England’s National Institute of Health



ANDREW BAILEY
MISSOURI ATTORNEY GENERAL

FAST FACTS
EMERGENCY HEALTHCARE REGULATION



As Attorney General, I will protect children and enforce the laws as written, which includes upholding state law on experimental gender transition interventions.

4,400% INCREASE in girls referred for gender transition treatment in the UK in 10 years.

55% Percent of detransitioners who say they received no adequate evaluation before being put on life-altering drugs

50% Of pediatric gender clinics that do not require any psychological assessment before starting life-altering puberty blockers and cross-sex hormones

0 Clinical Trials or FDA Approvals have concerning the use of Puberty Blockers and Sex Hormones in Children's Gender Care

The Emergency Healthcare Regulation Focuses on Two Specific Avenues of Care

1

**SPECIFIC INFORMED-CONSENT
DISCLOSURES INFORMING PATIENTS THAT;**

THE USE OF PUBERTY BLOCKER DRUGS OR CROSS-SEX HORMONES TO TREAT GENDER IDENTITY DISORDER OR GENDER DYSPHORIA IS EXPERIMENTAL AND IS NOT APPROVED BY THE FOOD AND DRUG ADMINISTRATION (FDA)

THE FDA HAS ISSUED A WARNING THAT PUBERTY BLOCKERS CAN LEAD TO BRAIN SWELLING AND BLINDNESS

SWEDEN'S NATIONAL BOARD OF HEALTH AND WELFARE ("NBHW") RECENTLY DECLARED THAT, AT LEAST FOR MINORS, "THE RISKS OF PUBERTY SUPPRESSING TREATMENT WITH GNRH-ANALOGUES AND GENDER-AFFIRMING HORMONAL TREATMENT CURRENTLY OUTWEIGH THE POSSIBLE BENEFITS"

THE ENDOCRINE SOCIETY FOUND THAT "THE LARGE MAJORITY (ABOUT 85%) OF PREPUBERTAL CHILDREN WITH A CHILDHOOD DIAGNOSIS DID NOT REMAIN GD/GENDER INCONGRUENT IN ADOLESCENCE"

2

**ADDITIONAL SAFEGUARDS
INCLUDING;**

FULL PSYCHOLOGICAL OR PSYCHIATRIC ASSESSMENT, CONSISTING OF NOT FEWER THAN 15 SEPARATE, HOURLY SESSIONS OVER THE COURSE OF NOT FEWER THAN 18 MONTHS

ENSURE THAT ANY EXISTING MENTAL HEALTH COMORBIDITIES OF THE PATIENT HAVE BEEN TREATED AND RESOLVED

TRACKING ALL ADVERSE EFFECTS THAT ARISE FROM ANY COURSE OF COVERED GENDER TRANSITION INTERVENTION FOR ALL PATIENTS BEGINNING THE FIRST DAY OF INTERVENTION AND CONTINUING FOR A PERIOD OF NOT FEWER THAN 15 YEARS

ENSURE THAT THE PATIENT HAS RECEIVED A COMPREHENSIVE SCREENING TO DETERMINE WHETHER THE PATIENT HAS AUTISM

OBTAIN AND KEEP ON FILE INFORMED WRITTEN CONSENT

Progressive Countries that are Questioning Interventionist Healthcare for Minors



Finland

"As far as minors are concerned, there are no medical treatments that can be considered evidence-based."

Finland's National Health Care Council

Sweden

"Lack of reliable scientific evidence concerning the efficacy and the safety of both treatments [puberty blockers and cross-sex hormones]."

Sweden's National Board of Health and Welfare

England

"Found limited evidence for the effectiveness and safety of gender-affirming hormones in children and adolescents with gender dysphoria, with all studies being uncontrolled, observational studies, and all outcomes of very low certainty."

England's National Institute of Health



4,400% INCREASE in girls referred for gender transition treatment in the UK in 10 years.

55% Percent of detransitioners who say they received no adequate evaluation before being put on life-altering drugs

50% Of pediatric gender clinics that do not require any psychological assessment before starting life-altering puberty blockers and cross-sex hormones

0 Clinical Trials or FDA Approvals have concerning the use of Puberty Blockers and Sex Hormones in Children's Gender Care

The Emergency Healthcare Regulation Focuses on Two Specific Avenues of Care

1

SPECIFIC INFORMED-CONSENT DISCLOSURES INFORMING PATIENTS THAT;

THE USE OF PUBERTY BLOCKER DRUGS OR CROSS-SEX HORMONES TO TREAT GENDER IDENTITY DISORDER OR GENDER DYSPHORIA IS EXPERIMENTAL AND IS NOT APPROVED BY THE FOOD AND DRUG ADMINISTRATION (FDA)

THE FDA HAS ISSUED A WARNING THAT PUBERTY BLOCKERS CAN LEAD TO BRAIN SWELLING AND BLINDNESS

SWEDEN'S NATIONAL BOARD OF HEALTH AND WELFARE ("NBHW") RECENTLY DECLARED THAT, AT LEAST FOR MINORS, "THE RISKS OF PUBERTY SUPPRESSING TREATMENT WITH GNRH-ANALOGUES AND GENDER-AFFIRMING HORMONAL TREATMENT CURRENTLY OUTWEIGH THE POSSIBLE BENEFITS"

THE ENDOCRINE SOCIETY FOUND THAT "THE LARGE MAJORITY (ABOUT 85%) OF PREPUBERTAL CHILDREN WITH A CHILDHOOD DIAGNOSIS DID NOT REMAIN GD/GENDER INCONGRUENT IN ADOLESCENCE"

2

ADDITIONAL SAFEGUARDS INCLUDING;

FULL PSYCHOLOGICAL OR PSYCHIATRIC ASSESSMENT, CONSISTING OF NOT FEWER THAN 15 SEPARATE, HOURLY SESSIONS OVER THE COURSE OF NOT FEWER THAN 18 MONTHS

ENSURE THAT ANY EXISTING MENTAL HEALTH COMORBIDITIES OF THE PATIENT HAVE BEEN TREATED AND RESOLVED

TRACKING ALL ADVERSE EFFECTS THAT ARISE FROM ANY COURSE OF COVERED GENDER TRANSITION INTERVENTION FOR ALL PATIENTS BEGINNING THE FIRST DAY OF INTERVENTION AND CONTINUING FOR A PERIOD OF NOT FEWER THAN 15 YEARS

ENSURE THAT THE PATIENT HAS RECEIVED A COMPREHENSIVE SCREENING TO DETERMINE WHETHER THE PATIENT HAS AUTISM

OBTAIN AND KEEP ON FILE INFORMED WRITTEN CONSENT

Progressive Countries that are Questioning Interventionist Healthcare for Minors



Finland

"As far as minors are concerned, there are no medical treatments that can be considered evidence-based."

Finland's National Health Care Council

Sweden

"Lack of reliable scientific evidence concerning the efficacy and the safety of both treatments [puberty blockers and cross-sex hormones]."

Sweden's National Board of Health and Welfare

England

"Found limited evidence for the effectiveness and safety of gender-affirming hormones in children and adolescents with gender dysphoria, with all studies being uncontrolled, observational studies, and all outcomes of very low certainty."

England's National Institute of Health

“

As Attorney General, I will protect children and enforce the laws as written, which includes upholding state law on experimental gender transition interventions.

Missouri Attorney General Andrew Bailey

”